



Department of Purchasing and Contracting NON-COMPETITIVE PROCUREMENT REQUEST FORM

Requesting Department: Fire Rescue
 Department Contact Person: Jason G Smith Telephone: 678-406-7746
 Email: JGSmith@dekalbcountyga.gov

Requisition Number: _____ Suggested Supplier: Lexipol
 Estimated Amount of Purchase: \$ 120,735.55
 Detailed Description of the Goods or Services to be purchased: _____
First responder policy, training and wellness support solution application

Emergency (For Emergency Requests, Please check this box and answer all questions below.)

1. Date and Time of Emergency Occurrence: _____

2. Please state the nature of the emergency posing a risk to public health, welfare, safety or resources:

3. State how the Estimated Amount was determined to be Fair and Reasonable (attach supporting documentation):

Sole Source (Please check box and answer all of the following completely.)

1. Provide an explanation why the product, service or supplier requested is the only method that can satisfy the requirements. Please explain why alternatives are unacceptable. Be specific with regard to specification, features, characteristics, requirements, capabilities and compatibility. (Attach additional documents, if necessary):

Only vendor that provides a proprietary all encompassing first responders policy specific, training and wellness support solution vetted by Fire Services professionals and Public Safety Attorneys.

2. Will this purchase obligate us to a particular vendor for future purchases? (Either in terms of maintenance that only this vendor will be able to perform and/or if we purchase this item, will we need more "like" items in the future to match this one?) Explain in detail.

As long as the product is utilized.

3. Explain the impact to the County or Public if this request is not approved.

Expertise in solutions for the development of procedures and policies specific to Fire and Rescue Departments, will be delayed.

I hereby request that this non-competitive procurement request be approved for the purchase of the above stated work, material, equipment, commodity, or service.

Department Director (Typed/Printed Name) Darnell Fullum Signature: Darnell Fullum Digitally signed by Darnell Fullum Date: 2022.04.01 16:11:20 -0400 Date: 04/01/21

Do Not Write Below – for the Department of Purchasing and Contracting Use Only

Procurement Agent (Typed/Printed Name) Jenifer G. Chapital Signature: Jenifer Chapital Date: 4/26/22

Procurement Manager (Typed/Printed Name) Delois Robinson Signature: Delois Robinson Date: 4/26/2022

Approved Not Approved

Signature: Cathya Arnesen, Director, Department of Purchasing and Contracting Date: _____